PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

CLAIMS AS FILED - PART I

Application or Docket Number

09753326

. CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY TYPE OF			OR	OTHER THAN R SMALL ENTITY	
TOTAL CLAIMS								ATE	FEE	1 1	RATE	FEE
FOR ·			NUMBER F	NUMBER FILED N		UMBER EXTRA		SIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			> f minus 20= *			-	X	\$ 9=		OR	X\$18=	144
INDEPENDENT CLAIMS			3 minus 3 = *				×	40=		OR	X80=	, , , , , , , , , , , , , , , , , , , ,
MU	LTIPLE DEPEN	DENT CLAIM PI	•			+	135=		OR	+270=		
* If the difference in column 1 is less than zero, enter "C					"0" in c	olumn 2	T(OTAL		OR	TOTAL	St4.
CLAIMS AS AMENDED - PART II										•	OTHER THAN	
		(Column 1)		(Colum		(Column 3)	SN	MALL I	ENTITY	OR .	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	BER DUSLY	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X	\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	CLAINA	=	X	40=		OR	X80=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								135=		OR	+270=	
								TOTAL		OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)								IT. FEE			ADDIT. PEC	
		CLAIMS	15.44.25°	HIGH	EST				ADDI-			ADDI-
AMENDMENT B		REMAINING AFTER AMENDMENT		NUME PREVIC PAID	DUSLY	PRESENT EXTRA	R	ATE	TIONAL FEE		RATE	TIONAL
	Total	*	Minus	**		=	X	\$ 9=		OR	X\$18=	
	Independent	* NTATION OF MI	Minus	***	CLAIM	=	X	40=		OR	X80=	
	FIRST PRESE	NTATION OF MI	JETIPLE DEF	ENDEN	CLANVI		+1	135=		OR	+270=	
								TOTAL		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colum	nn 2)	(Column 3)	AUU	IT. FEE		•	AUDIT. FEE	
		(Column 1) CLAIMS		(Colun		(Column 3)			ADDI			ADDI
AMENDMENT C		REMAINING AFTER AMENDMENT		NUME PREVIC PAID I	USLY	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***	. 01 4114	=	Х	40=		OR	X80=	
_	FIRST PRESE	NTATION OF M	OLITPLE DEF	ENDENT	CLAIM		+1	35=		OR	+270=	
		mn 1 is less than t						TOTAL			TOTAL	
***	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											